

**CITY OF NORMAN
SUPPLEMENTAL QUESTIONNAIRE
MAINTENANCE WORKER I
(Street Division)**

Name: _____ Date: _____

This questionnaire is a supplement to your application and will be used for further evaluation of your education, training, and experience as it relates to the Maintenance Worker I position for which you applied. **FILL OUT THE QUESTIONNAIRE COMPLETELY EVEN IF THIS INFORMATION IS ON YOUR APPLICATION/RESUME!**

1. Do you have a valid Oklahoma Driver's License and a good driving record? ____ Yes
____ No

2. Please list what kind of hand and/or power tools you have operated.

3. What additional experience, training, certification, and/or special skills do you have that would relate to this position? (Please refer to the employment announcement which is inside the application.)

4. List any other information, including personal strengths, that you feel will aid us in determining your qualifications for this position.

EQUAL OPPORTUNITY EMPLOYER